

							PAGE:
REPORT DATE: 06/14/2007						REPORT TIME	: 19:26:03.8
	Payroll Repor	t for the period	from Mon Jan 2	9, 2007 to Sun	Feb 4, 2007		
REG regular OTW ovt-week Types of punches not include	OTD ovt-day M	ISC misc pay SA	AL salary ADJ ; ation: PADJ pro	adjustment Ol ev.period adjus	EL deleted punch twent HOL holi	* Rate chan days SHDF shi	ged in punch ft diff.pay
SCHELHORN, JENNIFER	0103	Department FRONT OF HOUSE		•	Type Hours REG 2.5500	Rate	Total
SCHELHORN, JENNIFER		•	BARTENDER	•	REG 2.5500		Total

DURABLE GENERAL POWER OF ATTORNEY

NEW YORK STATUTORY SHORT FORM

SHONID AON BECOME DISYBIED OF INCOMBELENT THE FOMERS AON CRAIN BELOW CONTINUE TO BE EFFECTIVE

Caution: This is an important document. It gives the person whom you designate (your "Agent") broad powers to handle your property during your lifetime, which may Include powers to mortgage, sell, or otherwise dispose of any real or personal property without advance notice to you or approval by you. Then powers will continue to exist even after you become disabled or incompetent These powers are explained more fully In New York General Obligations Law, Article 5, Title 15, Sections 5-1502A through 5-1503, which expressly permit the use of any other or different form of power of attorney.

This document does not authorize anyone to make medical or other health care decisions. You may execute a health care proxy to do this.

If there is anything about this form that you do not understand, you should ask a lawyer to explain it to you.

THIS is intended to constitute a DURABLE GENERAL POWER OF ATTORNEY pursuant to Article 5, Title 15 of the New York General Obligations Law:

TOA OT in-fact TO ACT	Ш
(b) two or more persons are to be appointed agents by you, insert their name and addresses above.	
(If one $$ person is to be appointed agent, ins ert the name and address of your agent above)	
(ווצהגן אסחג טמשה מעק מקקנה (ssalppa מעקנה)	
I,	

of the blank spaces to the left of your choice:)

] Each agent may SEPARATELY act.

J All agents must act TOGETHER.

(If neither blank space is initialed, the agents will be required to act TOCETHER)

IN MY NAME, PLACE AND STEAD, in any way which I myself could do, if I were personally present, with respect to the following matters as each of them is defined in Title 15 of Article 5 of the New York General Obligations Law to the extent that I am permitted by law to act through an agent:

DIRECTIONS: Initial in the blank space to the left of your choice any one or more of the following lettered subdivisions as to which you WANT to give your agent authority. If the blank space to the left of any particular lettered subdivision is NOT initialed, NO

executors, legal representatives and assigns, hereby agree to indemnify and hold harmless any such third party from and against any and all claims that may arise against such third party by reason of such third

To induce any third party to act hereunder, I hereby agree that any third party receiving a duly executed copy or facsimile of this instrument may act hereunder, and that revocation or termination hereof shall be ineffective as to such third party unless and until actual notice or knowledge of such revocation or termination shall have been received by such third party, and I for myself and for my heirs										
If every agent named above is unable, or unwilling to serve, I appoint (insert name and address of successor)										
y my subsequent disability or incompetence.	d bətəəff	This Durable Power of Attorney shall not be a								
	••••••									
form durable power of attorney only if they conform to the General Obligations Law.)	New York (ial provisions and limitations may be included in the stat of the provisions and limitations of the	oədS)							
(Q) each of the above matters identified by the following letters:]	(1) benefits from military service;]							
	•	erisits;								
seject;		(I) personal relationships and]							
the foregoing powers to any person or persons whom my attorney(s)-in-fact shall		(H) claims and litigation;]							
(P) full and unqualified authority to attorney(s)-in-fact to delegate any or all of]	(G) estate transactions;]							
] (O) all other matters;]	(F) insurance transactions;]							
] (N) tax matters;]	[E) business operating transactions;]							
parents, not to exceed in the aggregate \$10,000 to each of such persons in any year;] (D) banking transactions;]							
children and more remote descendants, and		transactions;								
] (M) making gifts to my spouse,]	(C) bond, share and commodity]							
(L) retirement benefit transactions;]	B) chattel and goods transactions;]							
] (K) records, reports and statements;	1] (A) real estate transactions;	}							
nt each of the powers so indicated.)	er to gra	order to the left of subdivision "(Q)" in ord								

typed on the blank line in subdivision "(Q)", and you may then put your initials in the blank

1/1/5000

(Signature and office of individual taking acknowledgment)

(Insert city or political subdivision and state or county or other place acknowledgment taken).

such appearance before the undersigned in the person upon behalf of which the individual(s) acted, executed the instrument, and that such individual made same in his/her/their capacity(ies), and that by his/her/their signature(s) on the instrument, the individual(s), or

name(s) is (are) subscribed to the within instrument and acknowledged to me that he/she/they executed the personally known to me or proved to me on the basis of satisfactory evidence to be the individual(s) whose

in the year

, before me, the undersigned, a Notary Public in and

for said State, personally appeared day of On the

STATE OF

On the

::88

COUNTY OF

(for use outside the State of New York)

VCKNOMFEDGWENL

/ York	v5V lo	State	Publica	Notary	

the person upon behalf of which the individual(s) acted, executed the instrument. same in his/her/their capacity(ies), and that by his/her/their signature(s) on the instrument, the individual(s), or name(s) is (are) subscribed to the within instrument and acknowledged to me that he/she/they executed the personally known to me or proved to me on the basis of satisfactory evidence to be the individual(s) whose

> for said State, personally appeared day of

, before me, the undersigned, a Notary Public in and in the year

::ss

STATE OF NEW YORK, COUNTY OF

(for use within the State of New York)

VCKNOMLEDGMENT

 (Jpa		puoi?.)	····	(KO∩ SIGN HEKE:) →				
002	6	day of		In Witness Whereof, I have hereunto signed my name this				

This Durable General Power of Attorney may be revoked by me at any time.

party having relied on the provisions of this instrument.

40/40 NYC								
REPORT DATE: 06/14/2007								PAGE:
***************************************							REPORT T	IME: 19:26:34.5
	Payroll Re	port for the period	from Mon (Feb 5, 3	2007 to Sun	Feb 11, 2007		
REG regular OTW ovt-wee Types of punches not incl	k 010 ovt-day uded in regular	MSC misc pay SAL or overtime calculati	≤alary ion: PAL	ADJ adj DJ prev.	justment D .period adju	EL deleted pur stment HOL ho	nch * Rate ci plidavs SHOF	nanged in punch
SCHELHORN, JENNIFER	0103		 Job		~	Type Hours		
		FRONT OF HOUSE B	BARTENDER			REG 21.1333		Total
	4-Denasts	mant. J.L				OTD 12.0333	:	
	1 Depart	mentJob	Day	-Date	RateType	InOut	Hrs-+	
	FRONT (OF HOUSE BARTENDER	Mon.	2/5		6:42p 11:50p		
	ŧ		Sat.	2/10		1:44p 6:45a	•	
	1		Sun.	2/11		7:44p 6:45a	•	
	+							

40/40 NYC PAGE: 1 REPORT DATE: 06/14/2007 REPORT TIME: 19:27:28.96 Payroll Report for the period from Mon Feb 12, 2007 to Sun Feb 18, 2007 REG regular OTW ovt-week OTD ovt-day MSC misc pay SAL salary ADJ adjustment DEL deleted punch * Rate changed in punch Types of punches not included in regular or overtime calculation: PADD prev.period adjustment HOL holidays SHDF shift diff.pay SCHELHORN, JENNIFER

103	Department	Job		Tips	Pool	Туре	Hours	Rate	Total
	FRONT OF HOUSE	BARTENDER				REG	24.0000)	
						OTD	9.0667		
+-Depar	tmentJob	Day	-Date	-Rate	Туре-	- Ir	Out	Hrs-+	
	OF HOUSE BARTENDER		2/12					0.00	
1		Tue.	2/13			6:45a	6:45a	0.00 1	
1		Wed.	2/14			6:45a	6:45a	0.00	
1		Thu.	2/15			6:45a	6:45a	0.00	
í		Fri.	2/16					11.10	
i		Sat.	2/17			_		11.02	
1		Sun.	2/18			-		10.95 1	
4						•			

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